2005 WHITE HOUSE CONFERENCE ON AGING
REPORT AND RECOMMENDATIONS on
RESEARCH TO IMPROVE HEALTH AND WELL-BEING FOR ALL AMERICANS

The Past: In the last half of the 20th century, investment in research to improve health provided dramatic returns in prevention, treatment and cures for disease and disability, consequently lengthening life expectancy and enhancing U.S. productivity.

The Present: Although U.S. health care spending per capita is the highest globally, it does not currently produce the highest quality of health for all its citizens. Across public and private sectors, the U.S. currently spends only six cents of each health dollar on research to promote health and prevent disease, disability and injury.*

The Future: In response to the first wave of baby boomers turning 60 in 2006, the U.S. must make a national commitment to significantly increase our investment in research in order to transition from a disease care to a health care system. Stimulation of new ideas and innovative solutions is a means to provide all Americans an optimal quality of life, as free from disease and dependence as possible.

Recommendations:

1) Intensify the U.S. investment in research to promote health and well-being, thereby accelerating the discovery of cures, preventions and treatments necessary to achieve the highest quality of life for all Americans and to minimize the economic burden of chronic disease and disability.

2) Encourage a seamless continuum of research, from the basic sciences to health outcomes, by better aligning public-private research capacity and lowering barriers to cooperation among researchers and health practitioners.

3) Invest in population-based and economic impact studies to better understand the needs of an aging U.S. population and to predict future demands.

Priority One: Intensify Investment

Background:
The fruits of research have advanced health care by delivering significant decreases in mortality and increases in productivity. However, preventions, treatments or cures remain elusive for many diseases and disabilities, including those that primarily affect older Americans. As an example of how we currently divide our health dollar, Medicare spends three times as much ($91 billion a year) on Alzheimer's disease *care* as is invested in the total annual budget of the National Institutes of Health ($28.4 billion in 2005). The population and health care costs of older Americans are growing, yet the U.S. investment in health research is stagnating. A strong and sustained investment in the research enterprise will produce substantive returns by stimulating improved health and reducing the economic impact of disease and disability.

* See attached – 2004 Investment in U.S. Health Research, Research!America

Implementation Strategies:

1. Commit to annual funding increases equal to or greater than the rate of research inflation (e.g., Biomedical Research and Development Price Index) for federal non-defense research.
2. Offer incentives to train more researchers and health care professionals who focus on improving the health and well-being of older Americans and their families.
3. Set policies that promote investment by the private sector to encourage expansion of their critical role in bringing discovery and innovation into the health marketplace.
4. Invest in innovation by allocating funding to high-risk/high-reward projects.

Priority Two: Streamlining Research

Background

Turning science into better health care has become increasingly complex as a result of heavy regulation and widening gaps in the research continuum. The widest gap exists at the point of translating evidenced-based theories into human clinical research, which is also the most common intersection of public and private investment. Without more focus on how various types of research entities can cooperate successfully, it is unlikely that the research community can maximize its efforts.

Implementation Strategies:

1. Make a substantive and sustainable investment in clinical research that in no way diminishes the U.S. investment in basic research.
2. Establish a system that allows health care professionals to match their patients with human clinical trials.
3. Reduce barriers between public and private research endeavors.

Priority Three: Measure Health Status and Evaluate Health Outcomes

Background:

By 2040, almost 30 percent of the population will be 60 or older. This substantial growth in the older population is driving policymakers to consider dramatic changes in such entitlement programs as Medicare and Social Security. To better inform this debate and demonstrate the relative value of research to other solutions, objective data are needed about the changing health characteristics of Americans.

Implementation Strategies:

1. Invest in data collection that effectively and objectively measures changes in the health status of Americans, including minority populations and the uninsured.
2. Develop a nationally standardized electronic health record and make the data available to the research community, while protecting the privacy of the patient.
3. Analyze the cost and economic impact of research to evaluate the effectiveness of our investment strategies.